

THE RELATIONSHIP OF SELF-CONCEPT TO OTHERS-CONCEPT  
IN INSTITUTIONALIZED MENTALLY RETARDED  
INDIVIDUALS WITH I.Q.'S  
BETWEEN 50 AND 75

By

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## PREFACE

Although research with the mentally retarded is increasing, much of what is known in many areas of psychology has not yet been applied to the mentally retarded. The area of self-concept is one of these.

The purpose of this study is to test the relationship between self-concept and others-concept in mentally retarded individuals with I.Q.'s between 50 and 75, with no visible physical handicaps, with chronological ages between 14 and 28, and with at least one year of institutionalization. In order to do this, it was necessary to devise a new test since no test existed suitable for that purpose.

Indebtedness is acknowledged to Dr. Roy Gladstone for his valuable guidance and assistance; to Dr. Ida T. Smith for her criticisms and suggestions concerning the organization and grammar of the study; to Dr. L. M. Gustafson and Dr. W. Rambo for their suggestions concerning the study; and to Mrs Anna T. Scruggs, Superintendent of the Enid State School and Dr. Bair, Superintendent of the Parsons State Training School for their cooperation in allowing the writer to conduct his study in their Schools.

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## CHAPTER I

### THE PROBLEM

#### Introduction to the Problem

Itard is considered by most historians to be the first person to attempt seriously the education of a mentally retarded person. In 1799 Itard<sup>1</sup> assumed the responsibility of training the "Wild Boy" who was found in the province of Aveyron in France even though Pinel, the leading psychiatrist of the day, felt that the boy was an incurable idiot.

Itard attempted to train the Boy by using methods he had used in teaching speech to deaf persons. Although he worked with the Boy for several years and improved his social behavior, Itard felt that he had failed because the Boy did not reach the level of understanding and intelligence that Itard had set for him. If Itard were alive today, he would realize that he was not a failure but that he had given impetus to research with the mentally retarded.

Itard had a great influence on Seguin,<sup>2</sup> who not only enlarged the area of the field which Itard had started, but developed a neurophysiological theory to explain the defect of feeble-mindedness and

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<sup>1</sup>Jean M.G. Itard, The Wild Boy of Aveyron, tr. G. and M. Humphrey (New York and London, 1932) pp. 104 ff.

<sup>2</sup>E. Seguin, Idiocy and Its Treatment by the Physiological Method, (Paris, 1864) Reprinted (New York, 1907).

directed efforts toward the rehabilitation of the feeble-minded. Seguin gave the name of profound idiocy to that condition thought to result from destruction within the central nervous system or brain itself. He felt that the logical method for improving the functioning of the brain or central nervous system was by specific training of the impaired senses so that the correct impressions might reach the brain. Through Seguin's school at the Bicetre in Paris, sense training, as a theoretical approach to the education of retardates, became known to the world. He continued his work until 1840 and his method was the first systematic approach to the training of the mentally retarded.

Guggenbuehl,<sup>3</sup> who was one of Itard's contemporaries, contributed to the study of mental retardation with his work on cretins. He established an institution for cretins in Switzerland which was the first of its kind and developed methods of training them.

Although Itard, Seguin, and Guggenbuehl were the nineteenth century educators who laid the foundation for the later development in the study of the mentally retarded, their view that mentally retarded individuals could be helped was not held by the majority of professional people.

Ewalt, Strecker, and Ebaugh<sup>4</sup> say:

Many professional people thought of mentally subnormal persons as comprising a stereotyped group of individuals so limited in understanding that they could not be taught even the rudimentary care of themselves and their bodies. They were regarded as being in a hopeless condition for which little if anything could be done.

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<sup>3</sup>S.E. Guggenbuehl, "The Cretins of Abendberg," American Journal of Insanity, XVII, (1860), P. 335.

<sup>4</sup>J.R. Ewalt, E.A. Strecker, and F.G. Ebaugh, Practical Clinical Psychiatry, (New York, 1957) p. 153.

Professional people thought that mental retardation was the result of poor heredity and that nothing could be done to improve mentally retarded persons.

Gradually, the view that mentally retarded individuals are hopeless hereditary cases was dispelled as a result of the work of Broca,<sup>5</sup> Head,<sup>6</sup> and Goldstein.<sup>7</sup> In 1861 Broca, who was a French anatomist, proved that injury to certain parts of the brain slowed intellectual functioning. His discovery of localization in the brain led to many studies of retardates. The most important of these studies were the ones of Head and Goldstein who developed a broader view of localization of psychological functions in the brain. As a result of these three studies, professional people realized that mental retardation may be the result of brain injuries instead of hereditary factors.

Currently, most professional people divide mental deficiency into two types:<sup>8</sup>

- 1) deficiency due to heredity, which is referred to as primary mental deficiency, and
- 2) deficiency resulting from organic brain pathology introduced after conception, which is referred to as secondary mental deficiency.

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<sup>5</sup>A. Broca, Sur le siege de la faculte du langage articule avec deux observations d'aphemie, quoted in Alfred A. Strauss, and Laura E. Lehtinen, Psychology and Education of the Brain-injured Child, (New York, 1947), p. 13.

<sup>6</sup>Henry Head, Aphasia and Kindred Disorders of Speech, (Cambridge, 1926).

<sup>7</sup>Kurt Goldstein, Die Lokalisation in der Grosshirnrinde, quoted in Alfred A. Strauss, and Laura E. Lehtinen, Psychology and Education of the Brain-injured Child, (New York, 1947), p. 13.

<sup>8</sup>James C. Coleman, Abnormal Psychology and Modern Life, (Chicago, 1956), p. 496.



For many years, little research was conducted with mentally retarded individuals because the professional people believed they were hopeless cases. Today, however, with the acceptance of the idea that retardates are not hopeless individuals, considerable research is being conducted with retardates.

Although investigation of the problems of retardates and experimentation with the retardates is increasing, there are still a good many areas which remain unexplored in mental retardation. The study of an individual's self-concept is one of these areas. No research has been completed at the present time that involves measuring the self-concept of the mentally retarded individual.

#### Statement of the Problem

The problem of the study is to determine, by developing a self-concept and others-concept test, if the self-concepts of mentally retarded individuals with I.Q.'s between 50 and 75, with no recorded physical anomalies, with chronological ages between 14 to 28, and with at least one year of institutionalization, are correlated positively with their others-concepts.

#### Null Hypothesis

The hypothesis upon which the study is based is that the self-concepts of mentally retarded individuals with I.Q.'s ranging between 50 and 75, with no recorded physical anomalies, with chronological ages between 14 to 28, and with at least one year of institutionalization, are not correlated with their others-concepts.

### Need for the Study

Retardates are individuals with emotions and feelings which are the same as those of "normal" individuals and the writer feels that most of the areas in psychology that have been applied to "normal" individuals can be applied to retardates. The retardates are amenable to research although their lack of intelligence and comprehension are hindrances. The writer feels that the study of self-concept is an important area of psychology and one that can be applied to the mentally defective. However, no study of the self-concepts of mentally retarded persons has yet been completed.

### Limitations of the Study

Certain limitations are involved in the study. The limitations are: 1) limiting the group of retardates to individuals with I.Q.'s between 50 and 75, 2) restricting the group of retardates to individuals without any visible physical deformities as determined by checking their medical records, and 3) using only mental retardates that reside in institutions. Retardates who are excluded because of these restrictions may have different self-concepts and others-concepts than the retardates who meet the various criteria. The mentally retarded individuals who meet the criteria comprise less than ten per cent<sup>9</sup> of the total population of institutionalized defectives.

The writer's purpose in using a group of retardates who have I.Q.'s

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<sup>9</sup>This figure is based on the inmate population of the Enid State School, Enid, Oklahoma; Pauls Valley State School, Pauls Valley, Oklahoma; Parsons State Training School, Parsons, Kansas; and Winfield State School, Winfield, Kansas.

between 50 and 75, who have no recorded physical deformities that are visible, and who reside in institutions, was to keep the variables as constant as possible. The writer used retardates with I.Q.'s between 50 and 75 because these retardates could comprehend the questions on the self-concept and others-concept test better than the retardates with lower I.Q.'s.

## CHAPTER II

### REVIEW OF THE LITERATURE

#### History and Theories of the Self-Concept

To study the history and development of the self-concept, it is <sup>as it concerns</sup> necessary to review the theories psychologists have posited concerning <sup>psychology</sup> the meaning of self-concept. The early theories of self stated that the self was a psychic agent or some type of inner activator or energizer that controlled man's actions. Maine de Biran<sup>10</sup> posited such a view. He felt that: "the self is an experiencing agent, and something more than a series of experiences; it is a unified spiritual principle."

The idea of self as a psychic agent was held by many professional people until psychology became a science and then the idea of self as a psychic agent or inner activator or energizer was eliminated from a position of importance in psychology. Scientific psychology had no place for something that could not be shown to exist by using experimental methods.

Gradually, new theories of self which were very different from the earlier theories of self were developed by psychologists. These new theories differed considerably from psychologist to psychologist. Each

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<sup>10</sup>Gardner Murphy, Historical Introduction to Modern Psychology, (New York, 1949), p. 58.

psychologist had his own ideas as to what the self consisted of and how it was developed. A representative group of psychologists that have the most fully developed self theories include: Rogers, Snygg and Combs, Sarbin, Sherif and Cantril, Hilgard, Bertocci, Chein, Stephenson, Mead, Koffka, Allport, Murphy, Cattell, McDougal, Angyal, and Sullivan. These psychologists represent the different views of self theory that exist at the present time.

Carl Rogers<sup>11</sup> is the leading self theorist today since he has the most fully developed theory of self and has empirical support to back up his theory. To Rogers, the self is a "differentiated portion of the phenomenal field and consists of a pattern of conscious perceptions and values of the "I" and "Me". By phenomenal field, Rogers means the totality of experience. His self has numerous properties such as:

1) it develops out of the organism's interaction with the environment, 2) it may introject the values of other people and perceive them in a distorted fashion, 3) the self strives for consistency, 4) the organism behaves in ways that are consistent with the self, 5) experiences that are not consistent with the self-structure are perceived as threats, and 6) the self may change as a result of maturation and learning.

The concepts of phenomenal self and phenomenal field, as used by Snygg and Combs,<sup>12</sup> are very similar to those of Rogers. Snygg and Combs believe that all behavior, without exception, is completely determined by and pertinent to the phenomenal field of the behaving organism. By the phenomenal field they mean the entire universe, including the person

<sup>11</sup> Calvin S. Hall and Gardiner Lindzey, Theories of Personality, (New York, 1957), pp. 478-484.

<sup>12</sup> Donald Snygg and Arthur W. Combs, Individual Behavior, (New York, 1949), p. 15.

himself, as experienced by the individual at the time the event occurs. The phenomenal field is all the things of which the individual is aware and it is always changing. These writers believe that every individual has a different phenomenal field.

Snygg and Combs define their concept of the phenomenal self as "those aspects of the phenomenal field to which we refer when we say 'I'." The phenomenal self has the feeling of complete reality and its physical boundaries are the skin or clothing surfaces. The phenomenal self also includes nearly all the adjectives used to describe people such as honesty, loyalty, and good-naturedness.

Sarbin<sup>13</sup> attaches the name "Epistemogenic Theory" to his self theory. He believes that behavior is organized around cognitive structures and that the self is one such structure or inference. The self is organized around substructures called empirical selves which are interrelated through some learning mechanism. He believes that the self is empirically derived. The self is the resultant of experience, that is, the interaction with body parts, things, and persons. The interbehavioral field determines the properties of these substructures at any given time. He says that the self is in continual and progressive change. He feels that organic maturation and reinforcement of elected responses contributes to changes in the empirical selves.

Sarbin says the development of the self follows certain steps:

- 1) Starts with the neophyte--completely unorganized.
- 2) Tensions arising out of the uncorrected homeostatic

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<sup>13</sup>Theodore R. Sarbin, "A Preface to a Psychological Analysis of the Self," Psychological Review, LVIV, (1952), pp. 11-22.

imbalance become part of the stimulus field of the infant. 3) The next level of development is the primitive constructed self. 4) Next cognition becomes more varied, rich, and complex with the growth of non-verbal language structures. This is the development of the "I". 5) With the "I", the child attains a more refined concept and at the same time acquiring a conventional symbol for self references.

In Sarbin's self theory, the "I" consists of high-order inferences (reference schemata) which developed from the low order inferences that were first present in the infant. He offers the studies of language development in support of this.

Self and ego are used synonymously by Sherif and Cantril;<sup>14</sup> they say:

The ego is a genetic formation made up of a host of personal and social values and then these values serve the "I" as frames of reference by means of which he makes these judgments that effect him; that define for him success and failure; that determine his loyalties and allegiances; that spell out what he conceives to be his role, his status, his class.

Sherif and Cantril believe that the ego is not fixed. They believe that the self gets its beginning from the genetic development of the individual and is changed and modified by the stress of many diverse factors. They say the self is the center, and all attitudes and conceptions revolve around the self.

Hilgard<sup>15</sup> believes a true self-concept is difficult to obtain by asking the person to describe his thoughts and feelings. The difficulty occurs as a result of the influence the unconscious exerts on a person's

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<sup>14</sup> Muzaffer Sherif and Hadley Cantril, The Psychology of Ego Involvement, (New York, 1947).

<sup>15</sup> Ernest R. Hilgard, "Human Motives and the Concept of the Self", American Psychologist, IV, (1949), pp. 374-382.

self-concept. He advocates using the concept of inferred self which is derived from using projective techniques. He states three hypotheses about the inferred self:

1) It is the continuity of motivational patterns. That is, the organization of motives and attitudes that are central to the self is one which persists and remains recognizable as the person grows older. A pattern of persisting habits and attitudes. 2) The inferred self is the genotypical patterning of motives, that is, motives unlike in their overt or phenotypical expression, may represent an underlying similarity. 3) The important human motives are interpersonal both in origin and in expression.

In essence, Hilgard's self is a product of interpersonal influences. The self has full meaning only when it is expressed in social interaction.

To Bertocci,<sup>16</sup> self is a "dynamic unity" which is a complex, unitary activity of sensing, remembering, imagining, perceiving, wanting, feelings, and thinking.

The awareness of the self, Chein<sup>17</sup> believes, refers to the discriminatory activity of the organism; that is, the self is what the person is aware of in his total environment.

The phenomenological theory such as Rogers and Snygg and Combs advocate is not accepted by Stephenson.<sup>18</sup> To him a person's self-reflective statement and musing are, in principle, unique and irreversible events; his self-assessments are of the same nature. He feels that the important thing is the fact that each of us can reflect and make

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<sup>16</sup>Peter A. Bertocci, "The Psychological Self, the Ego, and Personality," Psychological Review, LVIV, (1945), pp. 91-99.

<sup>17</sup>Isidor Chein, "The Awareness of Self and the Structure of the Ego," Psychological Review, LI, (1944), pp. 304-314.

<sup>18</sup>William Stephenson, The Study of Behavior, (Chicago, 1953)



references to himself. Stephenson feels that the person carries about with him, so to speak, some "conceptual roles" which are stable characteristics about which predictions can be made concerning behavior.

To Mead,<sup>19</sup> the self is a social structure and arises in social experience. He says:

The self is not present at birth but arises in the process of social experience and activity; that is, the self develops in the given individual as a result of his relations to that process as a whole and to other individuals within the process.

Mead believes we think of our selves as others think of us.

Self occurs, Koffka<sup>20</sup> believes, as an experienced whole in the same field which contains our experiences with surrounding objects and events. The organization is made up of the total field with the self as a part of it.

To Allport,<sup>21</sup> all psychological functions commonly ascribed to a self or an ego must be admitted as data in the scientific study of personality. These functions are rather the special aspects of personality that have to do with warmth, with unity, and with a sense of personal importance. He calls them "propriate functions" (bodily sense, self identity, ego enhancement, ego extension, self image, rational agent, propriate striving, and the knower). Allport says that it is inadmissible to say the self performs acts, solves problems, or steers conduct

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<sup>19</sup>George H. Mead, Mind, Self, and Society, (Chicago, 1934).

<sup>20</sup>Kurt Koffka, Principles of Psychology, (New York, 1890).

<sup>21</sup>Gordon W. Allport, "The Ego in Contemporary Psychology," Psychological Review, L, (1943), pp. 451-478.

in a transpsychological manner that is inaccessible to psychological analysis.

"Self" is used in two contrasting senses by Murphy,<sup>22</sup> as the thing acting and as the thing acted upon. He says that there is an organism, which among its many functions includes the function of observing and knowing. The self observes and knows its visible surfaces, its vocal cadences, and its muscular strains. Being a more or less integrated system of responses, the organism appropriately orders its diverse impressions into an integrated whole and agrees to call that whole by the name which others have given it, just as it accepts the names that are current for other distinguishable wholes. In the same way it begins to cogitate on the nature of this totality, paying more heed to those aspects of it which others fail to note; the inner world becomes important. He says that from the diverse knowing and thinking processes, a conceptual unity is deduced. He says further that the self is a thing perceived, and it is also a thing conceived; in both senses it is constantly responded to.

The self is used in three ways by Cattell:<sup>23</sup>

1) for the immediately felt, acting self (I feel happy), 2) for the idea of the self entertained by the individual (I am a poor mathematician or I am a popular person), and 3) for the organizing center of the personality or structured self, as inferred from behavior by an observing friend or psychologist.

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<sup>22</sup>Gardner Murphy, Personality: A Biosocial Approach to Origins and Structure. (New York, 1947), p. 996.

<sup>23</sup>Raymond B. Cattell, Personality: A Systematic, Theoretical, and Factual Study, (New York, 1950), p. 654.

The self, McDougall<sup>24</sup> believes, is the core of personal identity. The self is the foundation of our own belief in our own reality and continuity, he states.

Angyal<sup>25</sup> defines the self as a biological factor used in the broadest sense of the word. He says that the self is the biological subject, while the symbolical representation of it we call self awareness or consciousness of self. He states that self awareness in the conscious image of the biological subject.

The self system, to Sullivan,<sup>26</sup> does not have any particular zones of interaction or particular physiological apparatus behind it; the self system literally uses all zones of interaction and all physiological apparatus which is integrative and meaningful from the interpersonal standpoint. He says the self system is an organization of educative experience called into being by the necessity to avoid or to minimize incidents of anxiety. He believes that to effectuate a change in the personality during therapy, one must change the person's self system.

#### Summary of Theories

In summary, although the theories of the above mentioned psychologists differ considerably, most of them view the self as either an object

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<sup>24</sup>William McDougall, An Introduction to Social Psychology, (Boston, 1908).

<sup>25</sup>Andras Angyal, Foundations for a Science of Personality, (New York, 1941).

<sup>26</sup>Harry S. Sullivan, The Interpersonal Theory of Psychiatry, (New York, 1953), p. 169.

or a process or as both an object and a process.

Symonds, Sherif and Cantril, Chein, and Mead view the self as an object. The individual perceives this object and, as with other objects he perceives, he evaluates it and learns attitudes toward it.

On the other hand, Sarbin, Stephenson, Murphy, and Cattell think of the self as consisting of a group of processes such as thinking, remembering, and perceiving.

The self is viewed as both an object and a process by Snygg and Combs, Hilgard, Koffka, and Rogers.

#### Writer's Definition of Self and Others

Self-concept is used by the writer of this paper as consisting of an individual's views, attitudes, evaluations, feelings, and thoughts about himself. Others-concept is used by the writer to mean: those views, attitudes, evaluations, feelings, and thoughts with which the individual regards other people in general. The writer views self as an object rather than as a process.

#### Research on Self-Concept

All available studies on the self-concept are concerned with the research performed with adults and children who are "normal". Several different types of research have been performed using the self-concepts of individuals. Fey, Phillips, Stock, and Sheerer conducted research which concerned acceptance of self as related to acceptance of others.

A questionnaire was developed by Fey<sup>27</sup> and administered to a group of "normal" individuals. They rated themselves and others on each item on a range of from 1 to 5. Fey's results showed that individuals with a high self-acceptance had a high acceptance of others. The correlation coefficient between self-acceptance and others-acceptance was  $r = .43$ .

A scale was developed by Phillips<sup>28</sup> to measure self-concept and others-concept of college students. His results showed that self-concept was positively correlated (.74) with others-concept in a group of "normal" male college students.

Stock<sup>29</sup> used ten randomly selected counseling cases that had from three to nine interviews with psychologist in her study. She found that the individuals who hold negative feelings toward themselves hold negative feelings toward others. The individuals who hold positive feelings toward themselves also hold positive feelings toward others. Her results did not show a significant correlation although they did show a positive correlation.

Sheerer<sup>30</sup> took ten counseling cases and gave them a scale from which their self-concepts and others-concepts could be determined. Her results

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<sup>27</sup>William F. Fey, "Acceptance by Others and Its Relationship to Acceptance of Self and Others: A reevaluation," Journal of Abnormal Social Psychology, L, (1955), pp. 274-276.

<sup>28</sup>E. Lakin Phillips, "Attitudes Toward Self and Others: A Brief Questionnaire Report," Journal of Consulting Psychology, XV, (1951), pp. 79-81.

<sup>29</sup>Dorothy Stock, "An Investigation Into the Interrelations Between Self-Concept and Feelings Directed Toward Other People," Journal of Consulting Psychology, XIII, (1949), pp. 176-180.

<sup>30</sup>Elizabeth T. Sheerer, "An Analysis of the Relationship Between Acceptance of and Respect for Self and Acceptance of and Respect for Others In 10 Counseling Cases," Journal of Consulting Psychology, XIII, (1949), pp. 169-175.

showed that there is a definite and substantial correlation between attitudes of self-acceptance and acceptance of others.

Considerable research has been performed concerning the effects of therapy upon self-concept. Rogers and Dymond, Ewing, Sheerer, Rainy, and O'Dea are psychologists who have carried out research in this area.

The study of Rogers and Dymond<sup>31</sup> involved studying improvement in the self-concept of a group of counselees after the counselees had received client-centered therapy. They found that the counselees' self-concepts and ideal selves became closer with therapy. The group which received no therapy showed no improvement. Rogers and Dymond showed that the higher the individual's self-concept was, the better the adjustment of the individual.

Research conducted by Ewing<sup>32</sup> on 39 college students showed that the clients who improved during therapy were the ones who changed their self-concepts toward their ideal selves.

From a study by Sheerer<sup>33</sup> which was concerned with the client's self-concept in successful counseling and with the changing content of the self-concept, two factors emerge: 1) the individual's evaluation of himself and his worth as a person can be significantly altered by the therapeutic process initiated by client-centered therapy, and 2) the individual's evaluation of others is significantly related to his

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<sup>31</sup>Carl R. Rogers and R.F. Dymond, Psychotherapy and Personality Change; Co-ordinated Studies in the Client-Centered Approach, (Chicago, 1954).

<sup>32</sup>T.N. Ewing, "Changes in Attitude During Counseling," Journal of Counseling Psychology, I, (1954), pp. 232-239.

<sup>33</sup>Sheerer, pp. 169-175.

attitude toward himself.

In a doctoral dissertation, Rainy<sup>34</sup> found that in successful counseling cases the positive self-references increased in frequency while the negative and ambivalent self-references decreased in frequency. This result was not found in unsuccessful counseling cases. He stated that changes in self-concept are important to psychotherapy.

The effects of counseling on 36 individuals were evaluated by O'Dea.<sup>35</sup> He came to the conclusion that self-concept change is one of the most important factors in evaluating the effects of counseling.

The value of self-concept as an indication of adjustment has been demonstrated by Calvin and Holtzman, and Brownfain. A study by Calvin and Holtzman,<sup>36</sup> concerning the individual's adjustment and the discrepancy between self-concept and inferred self, demonstrated that the more poorly adjusted the individual appears to be, the more self-depreciative he will be.

Determining the significance of self-concept as a true index of personality adjustment was attempted by Brownfain.<sup>37</sup> He gave a 25 question self-concept test to 62 college students. His results showed that on 21

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<sup>34</sup>V.C. Rainy, "The Self-Concept as a Factor in Counseling and Personality Organization," (unpub. Ph.D. dissertation, Ohio State University 1943), quoted by Sheerer, Journal of Consulting Psychology, XIII, (1949), pp. 169-175.

<sup>35</sup>D.J. O'Dea, "Evaluating the Effects of Counseling," Personnel Guidance Journal, XXXI, (1953), pp. 241-244.

<sup>36</sup>A.D. Calvin and Wayne H. Holtzman, "Adjustment and the Discrepancy Between Self-Concept and Inferred Self," Journal of Consulting Psychology, (1953), pp. 39-44.

<sup>37</sup>John J. Brownfain, "Stability of the Self-Concept as a Dimension of Personality," Journal of Abnormal Social Psychology, XLVII, (1952), pp. 597-606.

of 25 questions, the stable group rated themselves higher than the non-stable group and the difference on 5 questions attained significance at the .05 level of significance.<sup>36</sup>

In a study by Langeveld,<sup>38</sup> an attempt was made to see if the condition of the body had any effect on a person's self-concept. He found that a defect of the body leads to a lowered self-concept.

Torrance<sup>39</sup> was concerned with the counseling uses of the self-concepts of college freshmen. He found that a knowledge of self-concepts can be useful to the people who work with students because the self-concepts tell the counselors how much resistance they will encounter with the freshmen. Torrance believes that an understanding of the basis of misevaluation and an awareness of the techniques of deception used by the college students can be useful to the counselor and the advisor.

#### Summary of Research on Self-Concept

In summary, studies conducted thus far seem to indicate that the self-concept of individuals is positively correlated with their others-concept. In addition, a change in the self-concept of an individual is a good indication of progress in therapy. The studies also indicate that a knowledge of self-concept can be used as a means of studying the

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<sup>38</sup>J.M. Langeveld, "The Significance of One's Own Body for the Child's Experience of the Self," Psychological Research, V, (1954), pp. 206-220.

<sup>39</sup>P.E. Torrance, "Practical Uses of a Knowledge of Self-Concepts in Counseling and Guidance," Educational and Psychological Measurements, XIV, pp. 120-127.



adjustment of the individual. Finally, through knowing the self-concept of an individual, the counselor will be able to communicate with and understand the person better.

## CHAPTER III

### METHODS, PROCEDURES, AND RESULTS

#### Selection of the Original Questions

At the time the study began, no test was available to measure the self-concepts and others-concepts of mentally retarded individuals. In order to measure the self-concepts and others-concepts by use of a test, the writer had to develop a test to measure these concepts.

To aid in the development of the self-concept and others-concept test, the writer checked through the literature to see what types of tests had been used previously with "normal" individuals and to see if any of these tests would be applicable for use with the mentally retarded. The writer found two tests that he felt would be an aid in the development of the self-concept and others-concept test. The first test was William F. Fey's<sup>40</sup> Self-Concept Scale which consisted of questions such as the following: "I feel pretty sure of myself in situations"; "I waste too much time"; and "I feel different from other people". The second test was Sister Mary Amatora's<sup>41</sup> Child Personality Scale which consisted of such questions as the following: "Is he peppy and full of

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<sup>40</sup> William F. Fey, "Acceptance by Others and Its Relationship to Acceptance of Self and Others: A reevaluation," Journal of Abnormal Social Psychology, L, (1955), pp. 274-276.

<sup>41</sup> Sister Mary Amatora, Child Personality Scale, Gregory Company, (Cincinnati, 1951).

life"; "How friendly or sociable is he"; and "How well does he work with others".

The writer did not feel that the mentally retarded individuals could understand the questions on either Fey's Self-Concept Scale or Amatora's Child Personality Scale so the questions were reworded and simplified in an attempt to make the questions understandable to the retardates. For example, instead of "How friendly or sociable is he", the question "Do you think that you are friendly" was substituted.

The self-concept test which emerged consisted of forty-three questions that were reworded and simplified after being selected from Fey's Self-Concept Scale and Amatora's Child Personality Scale. The others-concept test, which consisted of forty-one questions, was developed by substituting the words "most other people" instead of the word "you" in the self-concept test. That is, the content was the same for the self-concept test and the others-concept test but the reference was different. For example: "Do you like to laugh" for the self-concept test and "Do you think most people like to laugh" for the others-concept test.

Two questions were omitted from the others-concept test that were included in the self-concept test because when the words "most other people" were substituted for the word "you", the question did not make logical sense. For example: "Do you think if most people knew what you were really like, they would like you" for the self-concept question and "Do you think if most people knew what other people were really like, they would like them" for the others-concept test question. This question used as a self-concept question is understandable but this question used as an others-concept question is difficult to understand due to the faulty reference.

The forty-three question self-concept test and the forty-one question others-concept test were combined to form one eighty-four question test (Appendix A). The questions on the self-concept and others-concept test were randomly assigned to the eighty-four question test so that a self-concept test question and an others-concept test question that had the same content would not be listed together. The random assignment of questions was also used to help eliminate the development of "set" in the retardates.

#### Item Analysis

In order to obtain data which would lead to the improvement of the test, it was administered to a group of retardates at the Parsons State Training School at Parsons, Kansas. This group was called the test development group. The test development group consisted of twenty-seven mentally retarded males that had an I.Q. range between 50 and 75. The WAIS intelligence test had been administered to these retardates by the psychologists at the Parsons State Training School. This was the test by which their I.Q.'s were determined. This group of retardates had no physical anomalies or sensory handicaps that were recorded. The chronological ages of the subjects ranged from 14 to 26 years. All of the subjects had lived within the institution for at least one year prior to the time at which the writer used them as subjects for the development of the self-concept and others-concept test.

The test development group of mentally retarded subjects consisted of all the retardates in the Parsons State Training School who had I.Q.'s between 50 and 75; who had no recorded physical anomalies or sensory defects; who had chronological ages ranging between 14 to 26;

and who had lived within the institution for at least one year prior to testing.

The writer administered the self-concept and others-concept test to the retardates one at a time. This was done to keep the response of one retardate from influencing the response of another retardate. The writer read each question to the retardates and scored each of their responses because most of the retardates cannot read or write.

A room in the research building of the Parsons State Training School was used by the writer to test the test development group of retardates. The retardates were called at twelve minute intervals from their cottages or from their job assignment to take the test. After the retardates had taken the test, they returned to their job assignments or to their cottages.

When each retardate entered the room, the writer asked him to sit down in the chair across the table from the writer. After the retardate's name had been recorded, the writer gave the retardate the following instructions: "I would like to ask you some questions and I want you to answer them either 'yes' or 'no'." After these instructions, the writer would then proceed with the series of questions.

In order to determine which items on the eighty-four question self-concept and others-concept test should be retained in the final form of the test to be administered to the experimental group, an item discrimination process was carried out through use of the Lawshe and Baker<sup>42</sup> nomograph.

To use the nomograph, the retardates were ranked in terms of their

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<sup>42</sup>C.H. Lawshe and R.C. Baker, "Three Ways of Computing the Relationship Between Percentages," Educational and Psychological Measurement, X, (1950), pp. 263-270.

self-concept scores from highest to lowest. A score of one was given for each self-concept question that was answered with a positive self-concept response. The retardates' self-concept scores ranged from 45 to 79 (See Fig. 1). The range of scores indicates that all of the mentally retarded individuals in this study gave more positive self-concept responses than negative self-concept responses.

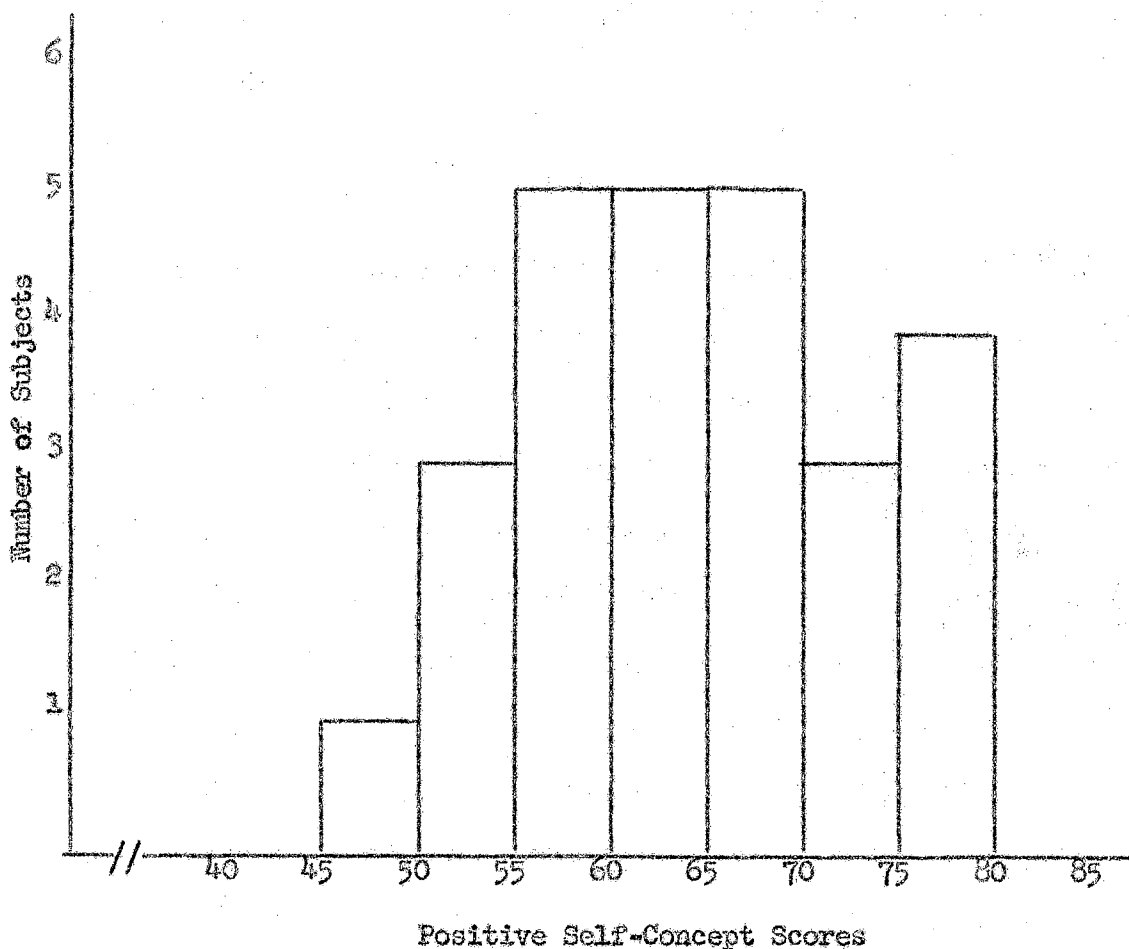


Fig. 1: THE POSITIVE SELF-CONCEPT SCORES OF THE TEST DEVELOPMENT GROUP OF RETARDATES ON THE 84 QUESTION SELF-CONCEPT AND OTHERS-CONCEPT TEST

After the retardates were ranked, they were divided into three equal groups consisting of nine retardates each. The top thirty-three percent of the retardates composed the group that was called the high

self-concept group. Their scores ranged from 67 to 79. The lower thirty-three percent of retardates composed the group that was called the low self-concept group. Their scores ranged from 45 to 59. The middle thirty-three percent of retardates were not used in the item validity analysis.

For each question in the self-concept and others-concept test, the percentage of retardates in the high self-concept group that gave a positive self-concept answer to the question and the percentage of retardates in the low self-concept group that gave a positive self-concept answer to the question was computed. The nomograph was then applied to see what questions showed a significant difference at the .05 or the .01 level of confidence between the high self-concept group and the low self-concept group.

The results from applying the nomograph show that thirty-two questions were significant at the .05 level of confidence (Appendix B). Out of the thirty-two questions that were significant at the .05 level of confidence, sixteen were also significant at the .01 level of confidence. Nine of these were self-concept questions and seven were others-concept questions. Of the sixteen questions that were significant at the .05 level of confidence, excluding those also significant at the .01 level of confidence, seven were self-concept questions and nine were others-concept questions. The remaining fifty-two questions were eliminated because they did not show a significant difference.

#### Test Validity

The writer believes that validity can be assumed for the self-concept and others-concept test since the test was derived from two tests considered to be valid. However, to offer a check on the validity of

the test the writer administered Fey's self-concept test and the writer's self-concept test and others-concept test to a group of "normal" individuals. The individuals used in this group, called the criterion measurement group, consisted of 36 "normal" college students who were enrolled in the Oklahoma State University. Their ages ranged from 19 to 30 and they had no visible physical anomalies. Twenty of these students were enrolled in Introductory Psychology and sixteen of them were enrolled in Child and Adolescent Psychology. All the males in these two psychology classes, with the exception of four students who were over thirty years old, were used in the criterion measurement group.

The writer's tests and Fey's test were stapled together with an answer sheet on the top. Eighteen copies of the two tests had Fey's test first and eighteen copies of the two tests had the writer's tests first. The tests were given to the students so that the first student had Fey's test first, the second student had the writer's test first, the third student had Fey's test first, the fourth student had the writer's test first, until all the students had a copy of the tests. This procedure was followed to keep the fatigue and practice effects constant for each test.

When the tests had been passed out to the students, the following instructions were given: "Write your age in the top left hand corner of the answer sheet where it says age. Please read each question and answer it either 'yes' or 'no'. The numbers on the questionnaire correspond to the numbers on the answer sheet. Do not discuss the questions with your neighbor. When you finish, bring the questionnaire and your answer sheet to me." After these instructions, the students were told to begin.



After the results had been obtained from the criterion measurement group, a correlation coefficient was computed between Fey's self-concept test and the writer's self-concept test and between Fey's others-concept test and the writer's others-concept test. The correlation coefficient between Fey's self-concept test and the writer's self-concept test was  $r = .688$ , which was significant at the .01 level of confidence. The correlation coefficient between Fey's others-concept test and the writer's others-concept test was  $r = .509$ , which was also significant at the .01 level of confidence. As a result of the above correlations, both of the writer's tests were considered to be validated.

#### Correlating Self-Concept and Others-Concept

The sixteen question self-concept test and the sixteen question others-concept test were administered to the experimental group in order to determine if their self-concepts and others-concepts were significantly positively correlated. The experimental group consisted of thirty-four mentally retarded males who resided in the Enid State School at Enid, Oklahoma. The I.Q. range of the experimental group was between 50 and 75. The psychologists at the Enid State School had administered either the WAIS or the Stanford-Binet Intelligence Scale to the experimental group to determine their I.Q. range. The experimental group had no recorded physical anomalies or sensory handicaps. Their chronological ages ranged from 14 to 28. The age range of the experimental group was expanded by two years beyond that of the test development group in order that more subjects might be included in the study. All members of the experimental group have lived within the institution for at least one year prior to the date on which the writer administered

the self-concept and others-concept test to them. This group was comprised of the total number of retardates residing in the Enid State School who met the age, I.Q., physical, and institution criteria that were set for this study.

The writer gave the self-concept test and the others-concept test to the retardates one at a time. He gave the test orally and recorded each of the responses. The instructions used with the experimental group were the same as the instructions used with the test development group. The tests were administered to the experimental group in the cottages where they lived. A prearranged time was set for the retardates to return to their cottages from their job assignments. The retardates were tested at six minute intervals in the reception room of their cottages.

After the sixteen question self-concept test and the sixteen question others-concept test had been administered to the experimental group, two correlation coefficients were computed between the two tests. The first correlation coefficient computed was between the sixteen question self-concept test and the sixteen question others-concept test. The coefficient was  $.236$ . This was not significant at the  $.05$  level of confidence. To be significant at the  $.05$  level of confidence, the coefficient needed to be  $.349$  or higher. On the basis of a correlation coefficient of  $.236$ , the writer would be justified in accepting his null hypothesis and saying that the self-concepts of mentally retarded individuals with I.Q.'s ranging between 50 and 75, with no recorded physical anomalies, with chronological ages ranging from 14 to 28, and with at least one year of institutionalization are not correlated with their others-concepts.

The second correlation coefficient computed was between the seven

matched questions on both tests. That is, only seven questions on both of the tests had essentially the same content after the item discrimination analysis had been carried out. Such matching content is illustrated by the following pair of questions, the first from the self-concept test, the second from the others-concept test: "Do you think you are honest?" and "Do you think that most people are honest?" The correlation coefficient between the two sets of matched questions was  $.415$  which was significant at the  $.05$  level of confidence. A correlation coefficient at this level would justify the rejection of the null hypothesis.

The writer feels justified in using the correlation between the seven questions on the self-concept test and the seven questions on the others-concept test that have the same content and rejecting his null hypothesis. The justification, the writer believes, for using the correlation coefficient between the seven questions results from the fact that the seven questions have the same content; they will be measuring the same factor or factors. The correlation coefficient between the sixteen questions was not used because most of the sixteen questions in the self-concept test had different content than the sixteen questions in the others-concept test. Consequently, the sixteen questions in the self-concept test could be measuring different factors than the sixteen questions in the others-concept test.

#### Reliability Coefficient from the Results of the Experimental Group

From the results of the experimental group, the reliability of the

sixteen question self-concept test and the sixteen question others-concept test was computed by using the Kuder-Richardson<sup>43</sup> formula for reliability. The reliability coefficient for the sixteen question self-concept test was .543. The reliability coefficient for the others-concept test was .566. Both of these coefficients are significant at the .01 level of confidence. The reliability coefficient is usually an underestimation when using the Kuder-Richardson formula for internal consistency.<sup>44</sup> This would indicate an underestimation of the reliability coefficient of the experimental group.

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<sup>43</sup>M.W. Richardson and G.F. Kuder, "The Calculation of Test Reliability Coefficients Based Upon the Method of Rational Equivalence," Journal of Educational Psychology, XXX, (1939), pp. 681-687.

<sup>44</sup>J.P. Guilford, Fundamental Statistics in Psychology and Education, (New York, 1956).

## CHAPTER IV

### SUMMARY AND CONCLUSIONS

A test was developed to measure the self-concepts and the others-concepts of mentally retarded individuals with I.Q.'s between 50 and 75, with no recorded physical anomalies, with chronological ages ranging between 14 and 28, and with at least one year of institutionalization.

The test was developed by taking questions from two valid and reliable self-concept tests and rewording and simplifying the questions to make them easier for the retardates to understand. The group of questions taken from the two self-concept tests were administered to a group of retardates at the Parsons State Training School (termed the test development group). Then Lawshe and Baker's nomograph was applied in order to determine which questions were to be included in the final form of the test. Thirty-two questions proved to be significant at or above the .05 level of confidence. Of these, sixteen were significant at the .01 level of confidence and sixteen were significant only at the .05 level of confidence. Nine self-concept questions and seven others-concept questions were significant at the .01 level of confidence. Of the questions significant at the .05 level only, seven were self-concept questions and nine were others-concept questions.

In order to support the writer's assumption of validity for the tests, the writer's tests were correlated with an outside criterion of validity. This was accomplished by giving the writer's tests and Fey's test to a group of "normal" college students. If a high correlation existed

between the writer's tests and Fey's test, then the writer's tests would be considered to be validated. The correlation coefficient between Fey's others-concept test questions and the writer's others-concept test was  $r = .509$ . The correlation coefficient between Fey's self-concept test questions and the writer's self-concept test was  $r = .688$ . Both of these coefficients are significant above the .01 level of confidence. This would indicate that the writer's tests are valid tests and gives support to his assumption of validity.

The sixteen question self-concept test and the sixteen question others-concept test were administered to the experimental group at the Enid State School. A correlation coefficient was computed between the sixteen question self-concept test and the sixteen questions others-concept test and between the seven self-concept questions and the seven others-concept questions that had the same content. The correlation coefficient between the sixteen questions was  $r = .236$  which is not significant at the .05 level of confidence. The correlation coefficient between the seven questions was  $r = .415$  which was significant at the .05 level of confidence. Using the first coefficient, the null hypothesis can be accepted, but using the second coefficient, the null hypothesis would be rejected.

The writer believes that the coefficient between the seven questions should be used because these questions would be measuring the same factor or factors. Accepting the coefficient between the seven questions leads to a rejection of the null hypothesis.

The reliability coefficient was computed for the sixteen question self-concept test and the sixteen question others-concept test after they had been administered to the experimental group. The reliability coef-

ficient for the sixteen self-concept questions was .543 and the reliability coefficient for the sixteen others-concept questions was .566. Both of these coefficients were significant at the .01 level of confidence. The coefficients would be an underestimation because the Kuder-Richardson formulas tend to underestimate the reliability coefficients.

### Conclusions

The self-concept and others-concept of mentally retarded individuals with I.Q.'s between 50 and 75, with no recorded physical anomalies, with at least one year of institutionalization, and with chronological ages between 14 and 28 are correlated positively when tests having related questions are used to determine these concepts.

### Suggestions for Future Study

A study of this type could be carried further by computing a factor analysis of the results to see what self-concept and others-concept factors are being measured by the tests. More than one factor is involved with these tests since the correlations were different between the sixteen questions and the seven questions.

If a self-concept test could be developed to measure the self-concepts of all retardates with I.Q.'s above 29, an experimenter could correlate the self-concepts of retardates with I.Q.'s between 30 to 49 with those between 50 to 70 to see if a significant difference occurs. The writer believes that the retardates with I.Q.'s between 50 to 70 would have a lower self-concept than the retardates with I.Q.'s between 30 to 49 because the higher I.Q. group would have enough intelligence to realize their status in regard to "normal" people; the lower I.Q. group would

not have the intelligence to realize their status in regard to "normal" people.

The self-concepts of retardates that are 40 to 55 years old could be correlated with the self-concepts of retardates that are 14 to 28 years old to see if chronological age makes a significant difference between self-concepts.

If a test could be developed that is longer and that has self-concept questions and others-concept questions that have the same content, more confidence could be placed in the measurement of mentally retarded individuals' self-concepts and others-concepts. A test that has better reliability and validity would be of considerable value to psychologists who wanted to measure the self-concepts of retardates.

A study that includes more subjects in both the test development group and the experimental group is the final suggestion for future study.



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Self-Concept and Others-Concept Test for the Test Development Group

- Do you think you are good looking.
- Do you think most people like to laugh.
- Are you sure of yourself when you do something.
- Do you think most people share things with others.
- Do you think you are honest.
- Do you think most people work well together.
- Do you feel at ease with other people.
- Do you think most people are kind.
- Do most people pay attention to what you say.
- Do you think most people are restless.
- Are you very friendly.
- Do you think most people are polite.
- Are you satisfied with the way you are.
- Do you think most people are good natured.
- Are you neat and clean.
- Do you think most people feel helpless.
- Do you like yourself.
- Do you think most people are sad.
- Do you think people like you.
- Do you think most people respect themselves.
- Do you often feel helpless.
- Do you think most people are sure of themselves.
- Do you think your body is in good shape.
- Do you think most people get angry very easily.
- Do you think you are as smart as most people.
- Do you think there is something wrong with most people.
- Do you think there are many people who don't like you.
- Do you think most people are well satisfied with themselves.
- Do you have a lot of pep and energy.
- Do you think most people are easy to make happy.
- Do you think you are the same as other people.
- Do you think most people are afraid to say anything when they are with others.
- Do you think you can be depended on to do what you are told.
- Do you think people have the most fun when they are alone.
- Do people tease you most of the time.
- Do you think most people are the same.
- When you are with people, are you afraid to say anything.
- Do you think most people like others.
- Are you shy most of the time.
- Do you think most people worry about what others think of them.
- Do you think that if most people knew what you are really like, they would like you.
- Do you think most people can be depended on to do what they are told.
- Do you say things that would hurt others.
- Do you think most people are neat and clean.
- Are you easy to make happy.

6. Do you think most people wish they were someone else.
7. Do you think you waste a lot of time.
8. Do you think most people like themselves.
9. Do a lot of things bother you.
0. Do you think most people are very friendly.
1. Are you well satisfied with yourself.
2. Do you think most people are bothered by a lot of things.
3. Do you think people try to hurt you.
4. Do you think that most people would say things that would hurt others.
5. Do you wish you were someone else.
6. Do you think most people have good bodies.
7. Are you sure of yourself.
8. Do you think most people are honest.
9. Do you worry about what others think of you.
0. Do you think most people are liked.
1. Do you respect yourself.
2. Do you think most people pay attention to what others say.
3. Do you have the most fun when you are alone.
4. Do you think most people are good looking.
5. Are you good natured.
6. Do you think most people waste a lot of time.
7. Do other people think there is something wrong with you.
8. Do you think most people are sure of themselves.
9. Do you get angry very easily.
0. Do you think most people are at ease with a group of people.
1. Do you think you are popular with most other people.
2. Do you think most people are satisfied with the way they are.
3. Are you usually sad.
4. Do you think most people are smart.
5. Do you think you are polite.
6. Do you think most people have a lot of pep and energy.
7. Are you very restless.
8. Do you think most people are shy.
9. Do you work well with others.
0. Do you share things with others.
1. Do you think most people try to hurt others.
2. Do you think you are kind.
3. Do you like to laugh.
4. Do you think most people are teased a lot.

## Final Self-Concept Test

- . Are you sure of yourself when you do something. (.05)\*
- . Do you feel at ease with other people. (.05)
- . Are you very friendly. (.01)
- . Do you think people like you. (.01)
- . Do you think you are as smart as most people. (.01)
- . Are you well satisfied with yourself. (.01)
- . Do you think you have the most fun when you are alone. (.05)
- . Do you think you are polite. (.05)
- . Do you think you are honest. (.01)
- . Do most people pay attention to what you say. (.01)
- . Are you satisfied with the way you are. (.01)
- . Do you think your body is in good shape. (.01)
- . Are you easy to make happy. (.05)
- . Do you respect yourself. (.05)
- . Do other people think there is something wrong with you. (.01)
- . Do you like to laugh. (.05)

## Final Others-Concept Test

- . Do you think most people try to hurt others. (.05)
- . Do you think most people are at ease when they are with others. (.05)
- . Do you think most people waste a lot of time. (.01)
- . Do you think most people are honest. (.05)
- . Do you think most people worry about what others think of them. (.05)
- . Do you think most people are afraid to say anything when they are with others. (.05)
- . Do you think most people work well together. (.01)
- . Do you think most people like to laugh. (.05)
- . Do you think most people are teased a lot. (.05)
- . Do you think most people are satisfied with the way they are. (.05)
- . Do you think most people are sure of themselves. (.01)
- . Do you think most people pay attention to what others say. (.01)
- . Do you think most people are neat and clean. (.05)
- . Do you think most people have the most fun when they are alone. (.01)
- . Do you think most people are good natured. (.01)
- . Do you think most people share things with others. (.01)

\*Level of Confidence

Paired Scores Of The 34 Experimental Subjects That Were Used To Compute  
The Correlation Coefficient Between The 16 Question Self-Concept  
Test And The 16 Question Others-Concept Test

<u>Pupils</u>	<u>Self-Concept Scores</u>	<u>Others-Concept Scores</u>
1	8	12
2	12	12
3	12	9
4	13	10
5	13	15
6	13	13
7	12	10
8	14	11
9	15	13
10	14	12
11	15	15
12	8	13
13	13	6
14	13	14
15	14	15
16	15	14
17	11	13
18	16	13
19	12	8
20	14	12
21	15	12
22	16	12
23	14	16
24	14	14
25	15	14
26	14	12
27	14	9
28	13	13
29	16	12
30	11	8
31	12	10
32	11	12
33	15	11
34	13	14

Paired Scores Of The 34 Experimental Subjects That Were Used To Compute  
The Correlation Coefficient Between The 7 Matching Questions  
In The Self-Concept Test And In The Others-Concept Test

<u>Pupils</u>	<u>Self-Concept Scores</u>	<u>Others-Concept Scores</u>
1	3	6
2	4	4
3	5	3
4	5	4
5	6	7
6	6	7
7	6	4
8	6	5
9	7	7
10	6	5
11	7	7
12	4	7
13	5	2
14	5	7
15	6	6
16	7	6
17	4	5
18	7	6
19	6	4
20	6	6
21	7	7
22	7	7
23	6	7
24	6	7
25	7	7
26	6	6
27	6	5
28	7	6
29	7	7
30	4	4
31	5	4
32	4	6
33	7	6
34	7	6



VITA

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Master of Science

Thesis: THE RELATIONSHIP OF SELF-CONCEPT TO OTHERS-CONCEPT IN INSTI-  
TUTIONALIZED MENTALLY RETARDED INDIVIDUALS WITH I.Q.'S  
BETWEEN 50 AND 75.

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